## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re:	Case No. 14 B 43081
Sheila Ann Donaldson	
Debtor(s)	

## CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Marilyn O. Marshall, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 12/01/2014.
- 2) The plan was confirmed on 03/18/2015.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C.  $\S$  1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on  $\underline{NA}$ .
  - 5) The case was Dismissed on 07/13/2016.
  - 6) Number of months from filing to last payment: <u>19</u>.
  - 7) Number of months case was pending: <u>24</u>.
  - 8) Total value of assets abandoned by court order: <u>NA</u>.
  - 9) Total value of assets exempted: NA.
  - 10) Amount of unsecured claims discharged without payment: \$0.00.
  - 11) All checks distributed by the trustee relating to this case have cleared the bank.

## Receipts:

Total paid by or on behalf of the debtor \$2,396.21 Less amount refunded to debtor \$86.61

NET RECEIPTS: \$2,309.60

## **Expenses of Administration:**

Attorney's Fees Paid Through the Plan \$2,222.34
Court Costs \$0.00
Trustee Expenses & Compensation \$87.26
Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION: \$2,309.60

Attorney fees paid and disclosed by debtor: \$0.00

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
Accucheck	Unsecured	125.00	NA	NA	0.00	0.00
AFNI	Unsecured	199.00	199.94	199.94	0.00	0.00
Blair Corporation	Unsecured	57.00	NA	NA	0.00	0.00
Blue Cross Blue Shield of Illinois	Unsecured	600.00	NA	NA	0.00	0.00
C.C.S.	Unsecured	77.00	NA	NA	0.00	0.00
City of Chicago	Unsecured	1.00	NA	NA	0.00	0.00
Commonwealth Edison	Unsecured	551.00	923.54	923.54	0.00	0.00
H & R Block Bank	Unsecured	516.00	NA	NA	0.00	0.00
Head & Neck Cosmetic Surg	Unsecured	711.00	NA	NA	0.00	0.00
Illinois Dept Of Human Services	Unsecured	0.00	5,259.00	5,259.00	0.00	0.00
Illinois Dept of Revenue 0414	Unsecured	1,361.42	1,075.45	1,075.45	0.00	0.00
John H. Strogen, Jr Hospital of	Unsecured	176.00	NA	NA	0.00	0.00
Linebarger Goggan Blair & Sampson	Unsecured	500.00	NA	NA	0.00	0.00
PayFlex Systems USA, Inc	Unsecured	269.00	NA	NA	0.00	0.00
PEOPLE STATE ILLIN	Unsecured	5,309.00	NA	NA	0.00	0.00
Peoples Energy Corp	Unsecured	360.00	418.81	418.81	0.00	0.00
Stellar Recovery	Unsecured	557.00	NA	NA	0.00	0.00
West Suburban Medical Center	Unsecured	6,320.00	NA	NA	0.00	0.00

<b>Summary of Disbursements to Creditors:</b>			
·	Claim	Principal	Interest
	Allowed	<u>Paid</u>	<u>Paid</u>
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$0.00	\$0.00	\$0.00
TOTAL SECURED:	\$0.00	\$0.00	\$0.00
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$7,876.74	\$0.00	\$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$2,309.60 \$0.00	
TOTAL DISBURSEMENTS :		<u>\$2,309.60</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 11/21/2016 By: /s/ Marilyn O. Marshall
Trustee

**STATEMENT**: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.